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RALPHE LOCHER

(Depositor's name) LERNER GREENBERG STEMER LLP P O BOX 2480 HOLLYWOOD, FL 33022-2480 (Signatur November 2010 (Dat CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 10/770.616 02/02/2004 Wolfgang Eis AMB-131-01 2302 TITLE OF INVENTION: DEVICE AND METHOD FOR DRAWING OPTICAL FIBERS SMALL ENTITY ISSUE FEE DUE PUBLICATIÓN FEE DUE PREV, PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE \$1510 \$300 11/15/2010 nonprovisional NO \$0 \$1810 EXAMINER ART UNIT CLASS-SUBCLASS DEHGHAN, QUEENIE S 1791 065-381000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Laurence A Greenb (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, <sub>2</sub>Werner H Stemer (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Ralph E Locher listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed frecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Mainz, Germany Schott AG Please check the appropriate assignce category or categories (will not be printed on the patent) : 🚨 Individual 🚨 Corporation or other private group entity 🚨 Governme 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: 🖺 Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-109 (enclose an extra copy of this form) Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the phited States Patent and Trademark Office. November 15, 2010 Authorized Signature RALPH E. LOCHER KALPH E. LOCHER Typed or printed name Registration No. REG, NO. 41,947 REG. NO. 41,947

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